IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: FOGELMAN et al.

Attorney Docket No.: UCLAP013X1 /

2002-340-1

Application No.: 10/520,207

Examiner: JEFFREY E. RUSSEL

Filed: December 23, 2005

Group: 1654

Title: G-TYPE PEPTIDES TO AMELIORATE

ATHEROSCLEROSIS Confirmation No: 9839

CERTIFICATE OF EFS-WEB TRANSMISSION

I hereby certify that this correspondence is being transmitted electronically through EFS-WEB to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450 on March 9, 2009.

Signed: /Swapnali Joshi/ Swapnali Joshi

AMENDMENT TRANSMITTAL

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

| | Claims After Amendment | | Highest Previously Paid For | Present Extra | Small Entity Rate Fee | Large Entity Rate Fee | | |
|--|------------------------|-------|-----------------------------------|------------------|--------------------------|--------------------------|--|--|
| Total Claims | 88 | MINUS | 115 | 0 | x 26 = | x 52 = | | |
| Independent Claims | 04 | MINUS | 04 | 0 | x 110 = | x 220 = | | |
| Multiple Dependent Claim Present and Fee Not Previously Paid | | | | | | | | |
| | | | | Total | \$ | \$0 | | |

| | | Total | \$ | \$0 | | | |
|-------------|--|--------------------------------------|------------------------------|-----------|--|--|--|
| \boxtimes | Applicant(s) hereby petitions for a <u>Two</u> month extra aforementioned Office Action. | tension(s) of time to respond to the | | | | | |
| | Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 504480. | | | | | | |
| | Enclosed is our Check No. in the amount of | - | er the additional | | | | |
| \boxtimes | claim fee and/or extension of time fees. Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 504480 (Order No. <u>UCLAP013X1</u>). | | | | | | |
| | | Respectfully su Weaver Austin | bmitted, Villeneuve & San | npson LLP | | | |
| | | /Tom Hunter/ | | | | | |
| | | Tom Hunter Reg. No. 38,90 | 3 | | | | |

P.O. Box 70250 Oakland, CA 94612-0250